PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000									Ap C	plication	or Do	CKET NUM			
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL YPE	EN	ITITY	OR	OTHER SMALL			
TC	TAL CLAIMS		56		Total Control of the		Γ	RATE		FEE	1	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC F	EΕ	355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			56 minus 20=		· 36			X\$ 9=	.		OR	X\$18=	148		
INDEPENDENT CLAIMS			minus 3 =		*			X40=			1 1	X80=	710		
MULTIPLE DEPENDENT CLAIM P			RESENT				+135=		\dashv		OR				
• If	* If the difference in column 1 is less than zero, enter "0" in column 2										OR	+270=	1000		
									- [OR	TOTAL	1358		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 2)								SMAL	LE	NTITY	OR	OTHER SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=			
	Independent	*	Minus	***		=		X40=	1		OR	X80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA							+135=	┪			+270=			
									AL		OR	TOTAL			
	(Column 1) (Column 2) (Column 3)								ADDIT. FEEOH_ADDIT. FEE						
8		CLAIMS HIGH		HIGH	IEST		lr	.	1	ADDI-	1		ADDI-		
DMENT		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ŀ	TIONAL FEE		RATE	TIONAL		
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=			
AMEN	Independent	•	Minus	***		=		X40=	1		OR	X80=			
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							105	1			070			
	TOTAL										OR	+270= TOTAL			
ADDIT. FE											OR	ADDIT. FEE			
1	(Column 1) (Column 2) CLAIMS HIGHEST					(Column 3)	_								
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE		ADDI- FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	**		=		X\$ 9=			OR	X\$18=			
	Independent	<u> </u>	Minus	***		=		X40=	1			X80=	<u> </u>		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+		OR				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR OR											OR	+270=			
											OR ,	TOTAL ADDIT, FEE	. 10 (81 mass)		
		nber Previously Pa					r found	d in the a	appr	opriate box	in cot	umn 1.			